ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

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ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Frederick
2. Surname (Last Name)  Matsen III
3. Date  19-September-2016
4. Are you the corresponding author?  Yes  No
5. Manuscript Title
THE RELATIONSHIP BETWEEN THE CLINICAL AND RADIOGRAPHIC OUTCOMES OF THE REAM AND RUN PROCEDURE FOR GLENOHUMERAL ARTHRITIS
6. Manuscript Identifying Number (if you know it)

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If yes, please fill out the appropriate information below.

<table>
<thead>
<tr>
<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
<th>Other?</th>
<th>Comments</th>
</tr>
</thead>
</table>

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  Yes  No
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Dr. Matsen III reports personal fees from Elsevier Publishing Company, outside the submitted work;
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Section 1. Identifying Information

1. Given Name (First Name)  Jason
2. Surname (Last Name)  Hsu
3. Date  15-September-2016
4. Are you the corresponding author?  Yes ✔ No

Corresponding Author’s Name  Frederick A. Matsen III, M.D.

5. Manuscript Title
THE RELATIONSHIP BETWEEN THE CLINICAL AND RADIOGRAPHIC OUTCOMES OF THE REAM AND RUN PROCEDURE FOR GLENOHUMERAL ARTHRITIS
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Dr. Hsu has nothing to disclose.

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<tbody>
<tr>
<td>Moni</td>
<td>Neradilek</td>
<td>15-September-2016</td>
</tr>
</tbody>
</table>

4. Are you the corresponding author? [ ] Yes [x] No

Corresponding Author’s Name: Frederick A. Matsen III, M.D.

5. Manuscript Title
THE RELATIONSHIP BETWEEN THE CLINICAL AND RADIOGRAPHIC OUTCOMES OF THE REAM AND RUN PROCEDURE FOR GLENOHUMERAL ARTHRITIS

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Moni Neradilek has nothing to disclose.

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**Section 1. Identifying Information**

1. Given Name (First Name)  
   Stacy

2. Surname (Last Name)  
   Russ

3. Date  
   15-September-2016

4. Are you the corresponding author?  
   ☑ No

5. Manuscript Title  
   THE RELATIONSHIP BETWEEN THE CLINICAL AND RADIOGRAPHIC OUTCOMES OF THE REAM AND RUN PROCEDURE FOR GLENOHUMERAL ARTHRITIS

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Ms. Russ has nothing to disclose.

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1. Given Name (First Name)  
   Benjamin

2. Surname (Last Name)  
   Service

3. Date  
   15-September-2016

4. Are you the corresponding author?  
   □ Yes  ✔ No

5. Manuscript Title  
   THE RELATIONSHIP BETWEEN THE CLINICAL AND RADIOGRAPHIC OUTCOMES OF THE REAM AND RUN PROCEDURE FOR GLENOHUMERAL ARTHRITIS

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Dr. Service has nothing to disclose.

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5. **Relationships not covered above.**

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Definitions.

- **Entity:** government agency, foundation, commercial sponsor, academic institution, etc.
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ICMJE Form for Disclosure of Potential Conflicts of Interest

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1. Given Name (First Name)  Jeremy
2. Surname (Last Name)  Somerson
3. Date  15-September-2016
4. Are you the corresponding author?  ☑ No

Corresponding Author's Name
Frederick A. Matsen III, M.D.

5. Manuscript Title
THE RELATIONSHIP BETWEEN THE CLINICAL AND RADIOGRAPHIC OUTCOMES OF THE REAM AND RUN PROCEDURE FOR GLENOHUMERAL ARTHRITIS

6. Manuscript Identifying Number (if you know it)

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